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ABSTRACT

A product of a year-long Governors' Campaign for Children initiative of the National Governors' Association (NGA), this report uses examples from several states in the NGA to describe the state of children and their needs. The Governors' Campaign for Children has sought to: (1) increase public awareness of the needs of young children; (2) simplify and improve federal and state programs to once again focus on the needs of children and their families; and (3) help communities better respond to the needs of young children. One in four children below age 6 lives in poverty. Children living in poverty are at greater risk for health and developmental problems throughout childhood. They are more likely to go hungry; to have inadequate clothing, shelter, and medical care; to be born at low birthweight; to be abused or neglected; to drop out of school; and to be involved in criminal or delinquent activities. Each chapter reflects the initiatives of a particular state involved in the NGA. The following issues are addressed in the chapters: (1) "Child Poverty"; (2) "Adolescent Pregnancy"; (3) "Child Abuse and Neglect"; (4) "Foster Care"; (5) "Absent Fathers"; (6) "Parent Support"; (7) "Working Families"; (8) "Child Care"; (9) "School Readiness"; (10) "Preschool Participation"; (11) "Family Literacy"; (12) "Infant Mortality"; (13) "Lead Poisoning"; (14) "Prenatal Care"; (15) "Childhood Immunizations"; (16) "Health Care Coverage"; (17) "Children and Violence"; and (18) "Public Apathy". A list of program contacts is included. (BGC)

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# CHILDREN

## PROBLEMS AND SOLUTIONS

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# CHILDREN

## PROBLEMS AND SOLUTIONS

Edited by Elizabeth A. Stief

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Since their initial meeting in 1908 to discuss interstate water problems, the Governors have worked through the National Governors' Association to deal collectively with issues of public policy and governance. The association's ongoing mission is to support the work of the Governors by providing a bipartisan forum to help shape and implement national policy and to solve state problems.

The members of the National Governors' Association are the Governors of the fifty states, the territories of American Samoa, Guam, and the Virgin Islands, and the commonwealths of the Northern Mariana Islands and Puerto Rico. The association has a nine-member Executive Comittee, a Task Force on State Management, and three standing committees—on Economic Development and Commerce, Human Resources, and Natural Resources. Through NGA's committees, the Governors examine and develop policy and address key state and national issues. Special task forces often are created to focus gubernatorial attention on federal legislation or on state-level issues.

The association works closely with the administration and Congress on state-federal policy issues through its offices in the Hall of the States in Washington, D.C. The association serves as a vehicle for sharing knowledge of innovative programs among the states and provides technical assistance and consultant services to Governors on a wide range of management and policy issues.

The Center for Policy Research is the research and development arm of NGA. The center is a vehicle for sharing knowledge about innovative state activities, exploring the impact of federal initiatives on state government, and providing technical assistance to states. The center works in a number of policy fields, including agriculture and rural development, economic development, education, energy and environment, health, information management, social services, trade, training and employment, and transportation. The priorities for the association's research are set by the Governors.

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This publication is a product of the year-long Governors' Campaign for Children initiative of NGA Chair Howard Dean, M.D., of Vermont. The Campaign is a collaborative effort of the staff of several Governors' offices and NGA's Committee on Human Resources, the Education Policy Studies Division, Health Policy Studies Division, Employment and Social Services Policy Studies Division, Office of Public Affairs, Office of the Executive Director, and Office of Administration and Finance.

NGA staff members who deserve special recognition include Linda McCart, program director, and Elizabeth Stief, policy analyst, both of the Children and Social Services unit of the Employment and Social Services Policy Studies Division; Deborah Perry, senior policy analyst, Health Policy Studies Division; Shelley Borysiewicz, staff assistant, Office of Public Affairs; Shari Cantor and Erika Mikkelsen, interns, Employment and Social Services Policy Studies Division and Mary Emerson, intern, Office of Public Affairs.

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# Foreword

Children are in trouble. So began the announcement of my initiative as Chair of the National Governors' Association (NGA) on improving the well-being of young children and their families. Today, one in four children below age six lives in poverty, nine in every 1,000 infants die before age one, one third of all children below age two are not up-to-date on essential vaccines, and close to 3 million children are reported abused or neglected each year. Through the Governors' Campaign for Children, I have sought to:

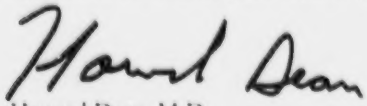
- increase public awareness of the needs of young children;
- simplify and improve federal and state programs to once again focus on the needs of children and their families, rather than on the needs of government agencies and programs; and
- help communities across the nation better respond to the needs of young children.

As part of our efforts to increase public awareness of the status of young children, each edition of NGA's biweekly newsletter the *Governors' Bulletin* published during the course of the Campaign has highlighted a troubling statistic on the well-being of children and outlined what a particular state or community is doing to change this statistic. To make these important statistics and solutions more widely available, we have gathered all of these articles together in this publication.

The series starts by examining barriers to effective service delivery at state and local levels that arise from the structure of existing federal programs. It explores family poverty, child abuse and neglect, teen pregnancy, family breakdown, infant mortality, inadequate access to health services, and other pressing issues. The series identifies innovative state and community solutions to each of these problems, then ends with an article on public apathy regarding the well-being of children.

The examples highlighted herein prove that we *can* change the alarming statistics and improve results for young children. They also show the variety of approaches states, under the leadership of Governors, are taking to do this. I hope that you will use this publication to spread the word about what is effective in meeting the needs of young children and their families and to replicate some of these good ideas in your state or community.





Howard Dean, M.D.
Governor of Vermont
Chair, National Governors' Association

# About 140 federal programs provide benefits to children and families

# Introduction

About 140 federal programs provide benefits to children and families. These programs, receiving at least $10 million in federal funding, are administered by ten federal departments and two independent agencies. The programs have been created over the last three decades by disparate congressional committees.



Over 15 percent of the 140 programs are administered solely by the federal government. In another 40 percent, the federal administering agency makes grants directly to various public or private agencies. The remainder are administered through states.

Too often federal programs for children and families have a wide variety of eligibility, matching, and reporting requirements and utilize many different funding mechanisms. As a result, states and communities face hurdles when attempting to coordinate the large number of federal programs to create comprehensive systems of services for children and families.

Led by Governors, states are taking varied approaches in their efforts to overcome these hurdles and reform the delivery of services to children and families. Some states have established children's cabinets to develop strategic plans for improving children's services. Other states have established family resource centers, streamlined eligibility processes, and decategorized funding in order to improve access to services.

Governors also are strengthening programmatice initiatives for young children and their families. These initiatives focus on key objectives, such as improving maternal and child health, preventing child abuse and neglect, and promoting quality in early care and education. All state initiatives share a common goal of changing the way services are delivered to improve the well-being of young children and families. A sampling of these initiatives is highlighted herein.

ONE IN FOUR
CHILDREN BELOW AGE SIX
LIVES IN POVERTY

## Child Poverty

### South Carolina

Twenty-five percent of children—one in four—below age six lives in poverty. A majority of these children (58 percent) have parents who work full- or part-time. Children living in poverty are at greater risk of health and developmental problems throughout childhood. They are more likely to go hungry, be inadequately housed and clothed, and have limited access to medical care. In addition, they are more likely to be born at low birthweight, to be abused or neglected, to drop out of school, and to engage in delinquent or criminal behavior.

Poverty among two-parent families is closely linked to changes in wages and incomes. The percentage of young men who earn enough to lift a family of four out of poverty has steadily declined over the past twenty years. The median earned income of men ages twenty-five to thirty-four in the United States has fallen by 26 percent in inflation-adjusted dollars since 1972. During this same period, many of the costs of raising children—including housing, transportation, and education—have risen steadily. To bolster the economic security of struggling young parents, many Governors are proposing reforms in state income tax structures.

In South Carolina, a plan to double the personal exemption parents can claim for children below age six, from $2,450 to $4,900, is being phased in over four years. Initiated under former Governor Carroll A. Campbell Jr. and supported by Governor David M. Beasley, implementation of this tax cut for families with young children began in fiscal 1994-95 with the approval of $9 million in the state budget. This raised the 1994 exemption for young children to $3,063.

The fiscal 1995-96 budget passed by the state legislature calls for $10 million to continue the phase-in and bring the level of the exemption to $3,750. Once the doubled exemption is in place in fiscal 1997-98, it will continue to increase with the yearly increase in the federal personal exemption. Through this initiative, the state hopes to help offset the high costs associated with raising young children and ensure that families receive the support they need to remain intact and economically self-sufficient.

MORE THAN 1 MILLION
ADOLESCENTS BECOME
PREGNANT EACH YEAR

# Adolescent Pregnancy

## Maryland

The United States has the highest teenage pregnancy, birth, and abortion rates in the Western world. More than 1 million adolescents become pregnant each year. In 1991 the birthrate for teenage women was 62 per 1,000—the highest since 1971.

There are high costs associated with adolescent pregnancy. In 1990 government spent $25 billion on social, health, and welfare services for families begun by adolescent mothers.

Adolescent mothers are at increased risk of school dropout, unemployment, and long-term welfare dependency. Their children are more likely to be in poor health, to lag in school, and to become teenage parents themselves. Studies suggest that preventing teen pregnancy requires more than just improving access to family planning services. If young people are to delay parenthood, they need to believe that other life options are available to them.

In Maryland the Governor's Council on Adolescent Pregnancy promotes the reduction of teen pregnancy rates through several strategies carried out in collaboration with other state agencies, local agencies, and private nonprofit groups.

These strategies include involving the community in prevention efforts, promoting parents as the primary sexuality educators of their children, convincing teenagers to delay sexual intercourse, ensuring family planning services for sexually active teens, and promoting positive outcomes for pregnant and parenting teens.

One of the council's activities to prevent adolescent pregnancies is the Campaign for Our Children, a six-year media campaign to raise public awareness about teen pregnancy through television, radio, posters, billboards, and educational materials. Through the campaign, the council hopes to reach every teenager in Maryland.

MORE THAN 3 MILLION
CHILDREN WERE REPORTED
ABUSED OR NEGLECTED
IN 1994

## Child Abuse and Neglect

### Wisconsin

More than 3 million children were reported abused or neglected in 1994. This represents a 2.5 percent increase over the number of cases reported in 1992, and about three times the number reported in 1980.

In 1993 more than 1 million cases of abuse or neglect were substantiated by child protective services agencies. This represents fifteen in every 1,000 U.S. children. Young children are disproportionately affected by abuse. One in three victims of physical abuse is a child less than one year old.

In order to prevent child abuse and neglect, all fifty states and the District of Columbia have established children's trust funds. These public/private partnerships finance community-based prevention programs.

In Wisconsin the Children's Trust Fund was created by the state legislature in 1983 to ensure a statewide network of family support and education services to prevent child abuse and neglect.

With the strong support of Governor Tommy G. Thompson and drawing on private contributions, federal matching funds, and five-dollar charges on duplicate birth certificates, the Wisconsin Children's Trust Fund provides funding, technical assistance, and training to thirty-four community-based child abuse and neglect prevention programs, including thirteen family resource centers. These family resource centers focus on providing families with parent education and support services. The Children's Trust Fund also develops statewide public education and media campaigns to increase awareness of child abuse and neglect prevention issues, prints a "Prevention Works" quarterly newsletter, and distributes free "Positive Parenting Kits" that contain parenting tips and booklets with information on child development, positive discipline, and resources available for parents.

AT THE END OF FISCAL 1993, AN ESTIMATED 464,000 CHILDREN WERE IN FOSTER CARE

## Foster Care

### Montana

At the end of fiscal 1993, an estimated 464,000 children were in foster care. This is almost twice the number of children in foster care in 1982. More than two thirds of foster children are removed from their homes because of neglect or caretaker absence or incapacity. The recent increase can be attributed in large part to a growing number of infants entering foster care as a result of prenatal drug exposure and abandonment at birth by drug-abusing parents. Once in foster care, children are often moved from home to home. Approximately 55 percent of children in foster care experience two or more placements.



In fiscal 1993, federal and state governments spent an estimated $14.3 billion on foster care. There are other costs as well. Former foster children tend to be overrepresented among runaways, prisoners, and welfare recipients. Many suffer from low self-esteem and have difficulty establishing and maintaining personal relationships.

The high cost of foster care services and the negative effects of removing children from their homes have prompted many states to reform their child welfare systems. These efforts focus on reducing out-of-home placements through support and intensive rehabilitative services for families, limiting the duration and number of foster care placements for children who must be removed from their homes, and finding permanent living arrangements for those children who cannot return to their homes.

In Montana the Families for Kids project was launched to meet the needs of children in the state child welfare system. The initiative streamlines the child welfare system by implementing new procedures to find permanent homes for the backlog of children who have been in foster care longer than one year and who will not be returned to their birthparents, by reducing the number of caseworkers per family, and by reducing the number of foster care placements. Families for Kids was developed with the assistance of Montana citizens, including members of the seven Native American reservations in the state, and is supported by the W.K. Kellogg Foundation.

ALMOST 40 PERCENT OF
ALL CHILDREN LIVE IN
A HOME WITHOUT THEIR
BIOLOGICAL FATHER

## Absent Fathers

### California and Ohio

Today, one in three children is born to a single woman, a rate that is three times higher than just twenty-five years ago. In addition, the divorce rate is also rising. Now 40 percent of first marriages end in divorce, compared with only 16 percent of first marriages in 1960. Since 1970, the number of children below age six living with single parents has tripled, from 2.1 million to 6.5 million in 1993. Today, almost 40 percent of all children live in a home without their biological father.

Children raised by one biological parent score lower than children raised by two biological parents on measures of health, education, and emotional and behavioral adjustment and are more likely to drop out of high school, have a child out of wedlock, abuse drugs and alcohol, commit suicide as teenagers, or become juvenile delinquents.

To address the problem of absent fathers, many states and communities have launched initiatives to promote responsible fatherhood. In California Governor Pete Wilson has made responsible fatherhood a priority issue. To combat the growing number of California children growing up without a father, Governor Wilson convened a Focus on Fathers summit in June 1995 to discuss the important role of fathers in child development and to develop solutions to strengthen California families. Other states have launched similar initiatives.

At the local level, the National Institute for Responsible Fatherhood and Family Revitalization in Cleveland, Ohio, is helping young fathers turn their lives around by emphasizing the importance of being a father. The program focuses on establishing paternity, encouraging fathers to return to school or obtain their General Educational Development (GED) diploma, advising fathers to get a job, and urging fathers to stop drug and alcohol abuse. An evaluation by Case Western Reserve University found significant program impacts. At the time of evaluation, 74 percent of program graduates were working (compared with 26 percent on program entry), 84 percent had established legal paternity of their children, and 97 percent were providing financial support for two or more dependents.

EIGHTY-SIX PERCENT OF AMERICAN ADULTS BELIEVE THAT PARENTS TODAY OFTEN ARE UNCERTAIN ABOUT HOW TO RAISE THEIR CHILDREN

## Parent Support

### Minnesota

Eighty-six percent of American adults believe that parents today often are uncertain about how to raise their children. All parents need emotional support and practical help raising children, including information, advice, and feedback about child development and parenting. With today's increasingly mobile society, fewer parents are able to rely on the informal assistance of relatives, friends, neighbors, and community institutions.

To help fill this gap and support parents in their caregiving roles, many states are making parent education and support programs available. Minnesota's Early Childhood Family Education program is for all families with children from birth to kindergarten age. School districts offering this voluntary program encompass 99.6 percent of children below age five in the state. Funded through a combined local levy and state aid formula, Early Childhood Family Education is designed to support parents in raising children and is based on the assumption that parents are children's first and most significant teachers.

Although local programs are tailored to community needs, most include parent discussion groups, parent-child activities, home visits, health and developmental screenings for children, libraries of books and toys, and information on other community resources available for families. Parents constitute a majority on the local advisory councils that help match services to community needs. Evaluations show positive results for both parents and children participating in Early Childhood Family Education, including more confidence and social skills and fewer behavior problems among children, and increased peer support and knowledge of child development among parents.

MANY PARENTS
EXPERIENCE DIFFICULTY
BALANCING FAMILY AND
WORK RESPONSIBILITIES

## Working Families

### South Dakota

Many parents experience difficulty balancing family and work responsibilities. Three in ten men and four in ten women "often" or "very often" feel used up at the end of the work day. Seven in ten feel that way "some of the time." To help parents maintain a balance, many states are implementing family-friendly policies for state employees. Not only do these policies help families, but they also can improve worker productivity and retention rates.



To address the needs of families, South Dakota has implemented a flex-time policy for all state employees. Agency directors are required to develop flex-time plans for their departments, which must be approved by the bureau of personnel. With their supervisor's agreement, an employee may work any schedule between 7:00 a.m. and 6:00 p.m. A complementary state policy allows parents to adjust their hours within the period of a week to volunteer in their children's schools.

South Dakota also has a flexible benefits plan that allows state employees to use pretax dollars to pay for child care and unreimbursed medical expenses. In addition, the state has revised its maternity leave policy to guarantee a minimum of six continuous weeks of leave, utilizing available annual or sick leave or taking leave without pay. With the approval of their supervisor, women may return to work part time after their maternity leave is over. South Dakota considers these family-friendly policies relatively inexpensive investments that produce substantial returns for both families and the state.

In 1993, 58 percent of mothers with children below age six were in the labor force

# Child Care

## Illinois and North Carolina

With a majority of mothers of young children in the workforce, child care has become a necessity for millions of American families. In 1993, 58 percent of mothers with children below age six were in the labor force. Many of these families, however, do not have access to affordable, high-quality child care.

Because of the link between affordable child care and mothers' employment decisions, and because of the importance of quality early care to young children's social, emotional, and intellectual development, states have undertaken initiatives to increase the supply of affordable child care and improve the quality of child care services.

To increase access to affordable child care for low-income families in Illinois, the department of children and family services (DCFS) formed a partnership with the Illinois Facilities Fund (IFF), a statewide nonprofit corporation to increase the number of child care facilities in low-income neighborhoods. In return for IFF taking the financing and construction risks, DCFS agreed to repay IFF's debts. To date IFF has borrowed $13 million in construction funds through tax-exempt bonds, received a $2 million grant, and obtained a $1 million no-interest loan to build seven new child care facilities in Chicago. Six of these centers are now open, serving 1,400 children.

To ensure that the available child care is of high quality, North Carolina has developed the T.E.A.C.H. (Teacher Education And Compensation Helps) Early Childhood Project, which links training in child development and early childhood education to wage increases for child care providers. The project provides scholarships to teachers for education programs at community colleges, colleges, and universities and ensures a salary increase or bonus each year a provider attends classes.

The T.E.A.C.H. Early Childhood Project is available to all child care providers in the state who work full-time in a regulated setting. Since January 1993, 2,685 child care center teachers, directors, and family child care providers have participated.

THIRTY-FIVE PERCENT
OF THE NATION'S CHILDREN
ENTER SCHOOL NOT
READY TO LEARN

## School Readiness

### Vermont

According to a 1991 survey of kindergarten teachers, 35 percent of the nation's children—more than 1 million—are not physically, socially, emotionally, or cognitively ready for school.

Of the teachers surveyed, 42 percent said the situation is getting worse. Only 25 percent said it is getting better. 23

To address this problem and achieve Goal One of the National Education Goals—"By the year 2000, all children in America will start school ready to learn"—a number of states have launched initiatives to ensure that young children and their families have access to a full range of services that support the health and optimal development of preschool-age children.

In Vermont the Success by Six initiative of Governor Howard Dean, M.D., seeks to help families protect, nurture, educate, and support the development of their children. Over a period of five years, school and human service districts are being invited to develop a comprehensive vision to support children and families in their community, identify existing resources and services that can be directed to support this vision, identify service gaps, and develop a proposal to address these gaps. The agency of human services and the department of education are working with each community to develop resources to implement this redesigned service system.

Initiatives suggested for consideration include home-visits for families with newborns, healthy baby services, quality child care and early education services, early intervention for developmentally delayed infants and toddlers, family support services, transition services, and collaborations between the agency of human services and schools.

Building on the Success by Six initiative, the Governor also has pooled federal and state funds to communities in a block grant to implement local plans for a unified system of education, health, and social services to better meet the needs of young children and their families.

SIXTY-FIVE PERCENT OF
THREE- AND FOUR-YEAR-OLDS
FROM LOW-INCOME FAMILIES
DID NOT PARTICIPATE IN
PRESCHOOL IN 1990

# Preschool Participation

## Ohio

One way to ensure that the nation will meet Goal One of the National Education Goals—"By the year 2000, all children in America will start school ready to learn"—is to provide all children with access to high-quality and developmentally appropriate preschool programs to help prepare them for school. Yet, 65 percent of three- and four-year-olds from low-income families did not participate in preschool in 1990. Data suggest that, compared with higher income children, poor children are less likely to participate in such programs and are more likely to come to school physically, socially, emotionally, or cognitively unprepared to learn. They are also at the highest risk of later school failure.

Research has demonstrated the potential benefits of preschool programs for poor children: better test scores in elementary school, fewer grade retentions, and reduced placements in special education programs. Children from low-income families who attend preschool are more likely to go to college and hold jobs as adults and are less likely to receive welfare assistance or be arrested for a serious crime, compared with those who do not receive such services.

Head Start is the largest federal program providing preschool services to poor children. Despite recent expansion efforts, only 17 percent of eligible three-year-olds and 41 percent of eligible four-year-olds attended Head Start in fiscal 1993. To increase preschool participation rates among low-income children, a number of states have developed state preschool programs or supplemented Head Start with state funds.

In Ohio, Governor George V. Voinovich has made expanding Head Start a state priority. Ohio currently leads the nation in state funding for Head Start and leads all major industrial states in the percentage of eligible children in the classroom. Sixty-one percent of Ohio's eligible children now participate in the program. The Governor's budget proposal for the fiscal 1996-97 biennium calls for additional funding to provide Head Start placements for 84 percent of all eligible children. If approved, by June 1997, more than 55,000 Ohio children will attend Head Start annually.

ONLY 53 PERCENT OF PRESCHOOLERS IN THE UNITED STATES ARE READ TO DAILY

## Family Literacy

### Colorado

Early, regular reading to a child is one of the most important ways parents can improve that child's readiness for school. Reading to their children also helps parents serve as their child's first teacher and instill in the child a love of books and reading. Yet, statistics show that only 53 percent of preschoolers in the United States are read to daily. 27

Because one of the best predictors of whether a parent reads to a child and of how successful a child will be in school is the education level of the parent, many states are promoting family literacy programs that emphasize literacy skills for both parents and children. These programs also help parents teach their children by offering parents instruction in child development and healthy parent-child interaction.

In Colorado, First Lady Bea Romer is leading a family literacy initiative to increase the amount of time parents spend reading to their children, build greater public awareness of the importance of early literacy, and expand the number of family literacy programs in the state.

A component of this Colorado initiative for family learning is the "Read to Me, Colorado" public awareness campaign, a collaborative effort of the Governor's office, Pizza Hut, and the rotary clubs of Colorado.

The Governor's First Impressions early childhood office coordinates the campaign; Pizza Hut raises funding through the sale of "Read to Me" cards, which entitle cardholders to one free pizza for each one purchased; and rotary club members conduct outreach activities in communities.

Funds generated by the sale of "Read to Me" cards are used to support family literacy programs and volunteer projects across the state. Grants are administered by a donor advisory board comprised of literacy advocates, educators, and legislators. Read to Me, Colorado is modeled after the highly successful Read to Me campaign launched in Hawaii by former First Lady Lynne Waihee and the rotary club of Hawaii.

NINE IN EVERY 1,000
INFANTS IN THE UNITED
STATES DIE BEFORE AGE ONE

## Infant Mortality

### South Carolina

Nine in every 1,000 infants in the United States die before age one—a higher rate than in nineteen other nations. The infant mortality rate reflects the health status of women before and during pregnancy and the quality of risk-appropriate primary health care accessible to pregnant women and infants. 29

In South Carolina, the Caring for Tomorrow's Children initiative is addressing the problem of infant mortality through public awareness campaigns, education, and incentives.

Initiated by former Governor Carroll A. Campbell Jr. in 1989, the program provides a health tips and coupon booklet worth $1,600 in free and discounted goods and services to pregnant women as an incentive to seek prenatal care.

The coupons correlate with the nine months of prenatal exams and the first year of well-baby visits, and each has a relevant health tip on the back. After each prenatal or well-baby visit, a health care provider validates the coupons designated for that month. In addition to the incentive coupons, the booklet contains an educational health and help guide for pregnant women and new mothers. The program has a twenty-four-hour, toll-free hotline that women can call to order the booklet and seek assistance.

Caring for Tomorrow's Children is a partnership of the Governor's office, the March of Dimes, NationsBank, the Medical University of South Carolina, WYFF-TV of Greenville, WCIV-TV of Charleston, WPDE-TV of Florence, and WIS-TV of Columbia. South Carolina's infant mortality rate has decreased 21 percent since the program began. The program has become a model for similar programs in fifteen other states.

NEARLY ONE IN TEN CHILDREN
IN THE UNITED STATES IS
BELIEVED TO HAVE ELEVATED
LEVELS OF LEAD IN THEIR BLOOD

# Lead Poisoning

## Massachusetts

Lead poisoning is the leading environmental threat to children in the United States: nearly one in ten children is believed to have elevated levels of lead in their blood. The U.S. Centers for Disease Control places the number of children whose blood-lead levels exceed safe levels at 1.7 million. Lead poisoning can produce mental retardation and seizures. Even at low levels of exposure, it can impair physical and cognitive development.



Massachusetts is a recognized leader in childhood lead poisoning prevention. The state's Childhood Lead Poisoning Prevention Program (CLPPP) began in 1972 and is considered to be the nation's most comprehensive program to protect children from lead exposure. All children below age six receive annual screenings; high-risk children receive screenings more than once a year.

Children who are identified as having high blood lead levels receive a home visit to determine the potential sources of exposure. If dangerous levels of lead are found, the property is abated. Abatements can address plaster or paint exposure or other environmental hazards. Children who are at high risk for lead exposure also may have inspections or abatements conducted on their homes.

In addition to the screening and surveillance components of CLPPP, Massachusetts conducts aggressive public outreach and provides medical and environmental case management to children who are identified as lead-poisoned or who live in high-risk areas. The program has been successful at reducing the number of children whose blood lead levels are high, even as the acceptable limits of lead exposure have decreased over time.

Massachusetts has also been a leader in the primary prevention of lead poisoning, providing resources and assisting property owners in addressing lead paint hazards that can poison children. The state was the first to establish formal programs for training and licensing lead paint inspectors and contractors, allowing the use of encapsulant coatings to abate lead paint, and establishing state financial assistance programs for abatement.

ALMOST 1 MILLION BABIES ARE BORN EVERY YEAR IN THE UNITED STATES WITHOUT HAVING HAD THE BENEFIT OF EARLY PRENATAL CARE

# Prenatal Care

## Washington

Almost 1 million babies are born every year in the United States without having had the benefit of early prenatal care. Inadequate prenatal care can lead to low-birthweight babies, infant mortality, and higher health care costs for infants and their mothers. Infants born to low-income women are more likely to receive inadequate prenatal care.



Since 1989, Washington state has been improving access to maternal and infant care for low-income families with its First Steps program. The program is a collaborative effort that combines the resources of the department of social and health services and the department of health and community agencies. First Steps increases access to medical care for infants and pregnant women by modifying income guidelines for participation in Medicaid and increasing Medicaid reimbursement rates for maternity and pediatric care providers. The program also has streamlined the application process for clients by determining eligibility within fifteen days and stationing staff from the department of social and health services in community settings.

Two key components of the First Steps program are Maternity Support Services (MSS) and Maternity Case Management (MCM). MSS includes community health nursing, nutrition services, social work visits, childbirth education classes, and child care reimbursement for bed rest and visiting hospitalized newborns. MCM helps high-risk women and their families access more intensive medical, social, and education services.

Recent data indicate that women receiving MSS are 20 percent more likely to receive adequate prenatal care than women who do not receive such services. Since First Steps began six years ago, the rate of low-birthweight babies has declined from 8 percent to 6 percent among program participants.

ONE THIRD OF ALL CHILDREN
BELOW THE AGE OF TWO
ARE NOT UP-TO-DATE ON
ESSENTIAL VACCINES

# Childhood Immunizations

## Kentucky and Virginia

Vaccines are the most cost effective way to prevent infectious diseases in children. The U.S. Department of Health and Human Services estimates that for every dollar spent on a mumps/measles/rubella vaccine, twenty-one dollars are saved in potential treatment costs. Unfortunately, many of the nation's young children do not receive the immunizations they need.



One third of all children below the age of two are not up-to-date on essential vaccines. There are many reasons for this, including parents who do not know which vaccines their children need and health care providers who often miss opportunities to immunize children during health care visits. In addition, the cost of the full series of vaccines has grown from $15 in 1980 to $280 today, which makes it prohibitive for many families.

To increase the number of young children who are fully immunized, states have designed outreach campaigns and changed their service delivery systems. Many successful state immunization campaigns include partnerships with the private sector and/or collaboration with various public programs.

In Kentucky an integrated patient service using an online computer tracking system was implemented in all local health departments on July 1, 1994. This system links information about all immunizations received by children with the Special Supplemental Food Program for Women, Infants, and Children (WIC) and well-child services. The automated appointment system can alert health care providers to the immunization status of a child when the family comes for a WIC or well-child visit. Immunization dates received from other health care providers also can be entered into the database so that the child's record can be complete.

Other states have offered incentives for parents to ensure their children are up-to-date on their immunizations. In Virginia a local WIC program is offering families coupons for free diapers. These coupons, redeemable at Wal Mart, are distributed by the health department to parents who have had their children properly immunized. Neighborhood churches and community-based organizations provide funding to purchase the coupons.

FIFTEEN PERCENT OF ALL CHILDREN LIVING IN THE UNITED STATES IN 1992 WERE EITHER NOT ELIGIBLE FOR OR NOT COVERED BY PUBLIC OR PRIVATE HEALTH INSURANCE

# Health Care Coverage

## New Hampshire

Fifteen percent of all children (9.8 million) living in the United States in 1992 were either not eligible for or not covered by public or private health insurance. Most children without health insurance live in families where the head of household is a full-time, full-year worker. Employer coverage of children dropped 3 percent between 1988 and 1992.

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To increase the number of children with health coverage, particularly those in working poor families, many states have created new programs for children who are not covered by private health insurance and are not eligible for Medicaid.

In New Hampshire, a public/private partnership was formed to increase the number of children with health insurance coverage. Recognizing that 58 percent of all uninsured children in the state lived in middle-class families, the New Hampshire Healthy Kids program was launched in 1993 to provide an affordable option for health care coverage for these children. With the passage of the Healthy Kids Act, a nonprofit corporation was created to administer the program. This corporation established eligibility criteria and defined a benefits package that emphasizes primary and preventive health care services. Blue Cross and Blue Shield of New Hampshire was selected through a competitive process to serve as the insuring partner, and all of the hospitals in the state agreed to participate in the program. As a result of these partnerships, the cost of premiums for children was decreased by as much as 20 percent. Other partnerships were established with school systems, to conduct outreach and increase awareness of the program; with businesses and corporations; and with community-based organizations. The program was operational statewide as of May 15, 1995.

To be eligible a child must be between the ages of three and eighteen, not be eligible for Medicaid, be a resident of the state, and lack insurance coverage for three months. Health care services are provided in managed care plans at a monthly average cost per child of fifty-two dollars. A total of $240,000 of state general revenue funds were appropriated for this program for 1994.

ONE IN TEN CHILDREN
BELOW AGE SIX HAS
WITNESSED A SHOOTING
OR STABBING

## Children and Violence

### Massachusetts and Connecticut

A survey of patients at the Boston City Hospital Pediatric Clinic found that one in ten children below age six has witnessed a shooting or stabbing. Other studies suggest that as many as 3.3 million children witness parental abuse each year, including fatal assaults.

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Children themselves are frequently victims of violence as well. One in three victims of physical abuse—about 85,000 children—is less than one year old. Young children are profoundly affected by exposure to violence. Their sense of trust and security, so critical to their healthy development, is destroyed. Many exhibit symptoms indicative of posttraumatic stress disorder, including anxiety, fearfulness, aggressive behavior, withdrawal, attention disorders, physical symptoms, and disrupted patterns of eating and sleeping.

Children growing up in violent atmospheres are at greater risk of resorting to violent behavior themselves. Their ability to learn, to form healthy relationships with others, and to grow into healthy, productive, caring adults is seriously compromised.

To ameliorate these negative effects, a number of localities have developed intervention programs for young children exposed to violence. In Massachusetts the Boston City Hospital founded the Child Witness to Violence Project to address high rates of violence exposure among children in the Boston area. The project has three components: direct clinical interventions with young children who have witnessed violence, training and support for child care providers who serve these children to help them address the developmental impact of exposure to violence, and support for parents as they attempt to protect their children's physical and emotional well-being.

In Connecticut the Yale University Child Study Center and the New Haven Department of Police Service have developed the Child Development and Community Policing program to provide twenty-four-hour consultation services for children and families who have witnessed violence, seminars and clinical fellowships in child development for police officers, and weekly case conferences for police and mental health professionals.

FIFTY-FIVE PERCENT OF
ADULTS IN THIS COUNTRY
BELIEVE THAT MOST CHILDREN
WILL GROW UP TO BE WORSE
OFF THAN THEIR PARENTS

## Public Apathy

### Colorado

Although many people believe, and statistics such as child poverty and abuse rates confirm, that the well-being of children is declining, individuals often feel powerless to make a difference. Fifty-five percent of adults in this country believe that most children will grow up to be worse off than their parents. At the same time, most people lack confidence in the ability of government to meet children's needs. Although the responsibility for children lies first with their family, there is growing consensus that communities play a key role in supporting families and creating environments where children can grow and develop.

In Colorado a campaign for children has mobilized thousands of volunteers to work in their communities to improve the condition of young children. The Colorado Children's Campaign, working in partnership with First Impressions, Governor Roy Romer's early childhood initiative, has mobilized a statewide grassroots movement for children and families. The campaign collects statistics on the well-being of children in every county in the state and shares these data with county residents, along with suggestions for what individuals can do to change them.

For the past two years, the campaign has organized "doll projects" for the Week of the Young Child in April. This year volunteers in seventy cities from across the state made about 16,000 lifesize cardboard dolls, each representing a child that has been "left behind." The dolls were placed in the state capitol, media outlets, shopping malls, state offices, and other locations throughout the state. A card attached to each doll told the true story of a Colorado child and offered suggestions for ways individuals could help children in their community. The doll project resulted in the passage of $25 million in prevention programs for children and youth over the last two years.

The campaign is now using its network of mobilized citizens to implement a children's agenda for the state, focusing on preventive services for young children, including health care, family support, and quality child care.

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